

World War I reduced tidal marshes to approximately 200 acres. The remnant of this once vast tidal marsh is protected by the Refuge.

Jean first discovered the wonders of Tinicum Marsh as a youth while exploring the wilds of her neighborhood and learned of their endangerment through her involvement with Girl Scouts. Jean soon became an active member of CARP, a grassroots conservation organization that worked closely with government and political leaders to preserve and protect Pennsylvania's largest remaining freshwater tidal marsh. Through much of Jean's leadership with both CARP and as President of the Friends of the Heinz Refuge, as well as her community work with the League of Women Voters and with many other concerned local citizens, the Tinicum National Environmental Center (later renamed to the John Heinz National Wildlife Refuge at Tinicum) was established. Jean's leadership helped with the passage of four pieces of Federal legislation adding both land and funding for the refuge.

Ever the environmental champion, Jean has worked diligently over the past 30 years to ensure the future of the Reserve. Her work helped realign Interstate 95 to avoid paving over this important wildlife habitat; raise funds for the purchase of the Tinicum Lagoons to be included in the Refuge; establish the Tinicum Treasures Bookstore (all proceeds of which are used to support refuge educational and biological programs); and create the Cusano Environmental Education Center. Jean Diehl has, indeed, truly served our Nation as a founding parent of the John Heinz National Wildlife Refuge at Tinicum. I commend Jean Diehl for her outstanding service. She is among Pennsylvania's finest, and I am honored to bring forth her particular accomplishments at the Tinicum Refuge before this body and our Nation today.

EMERGENCY ROOMS HAVE REACHED A BREAKING POINT

HON. CHARLES B. RANGEL

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 21, 2006

Mr. RANGEL. Mr. Speaker, I rise today to introduce a New York Times editorial entitled, "Emergency in the Emergency Rooms" into the RECORD. This article emphasizes the fact that our Nation's emergency rooms and hospitals are seriously ill-equipped to manage major disasters such as the human costs of natural disasters or the occurrence of pandemic influenza. They are also failing to meet the challenge of increased demand by the poor who must use the emergency room for primary care because they cannot afford or do not have health insurance.

According to the Institute of Medicine, about 500,000 (five hundred thousand) ambulances are being redirected from full emergency rooms to others far away. Furthermore, patients awaiting admission to the hospital may spend from eight hours to two days in the emergency rooms before a hospital bed becomes available. Not only are our emergency rooms filled past capacity, but they also lack the services of critical specialists such as neurosurgeons, further crippling the ability of hospitals to immediately treat patients in medical crisis.

The editorial identifies a few causes for the emergency room crisis. First, the number of people seeking treatment in emergency rooms has increased sharply over the past decade. Also, in the same time period, some 700 hospitals and 425 emergency departments have been forced to close due to cost pressures. More importantly, the result of these situations is serious overcrowding, only worsened by a massive influx of patients who seek routine care in emergency rooms because they are either uninsured or on Medicaid but incapable of finding doctors who agree to treat them.

This issue has grave consequences on the United States population as a whole, but it particularly affects the more than 60 million plus uninsured people in the United States, a population that will increase as employers are gradually eliminating health coverage. Ultimately, the United States will suffer greatly at the hands of large scale disasters if we do not improve our preparedness in hospitals and emergency rooms.

Some proposals to develop our emergency rooms include an end to diverting seriously ill patients to far away hospitals and alternatively diverting poor patients who congest emergency rooms seeking standard care. Of course, this would necessitate expanding health insurance coverage to the millions of uninsured and offering more primary care clinics and doctors to underserved neighborhoods. However, in the long run, the addressing of the emergency room crisis will cost the United States much, much less than the consequences.

[From the New York Times, June 21, 2006]

EMERGENCY IN THE EMERGENCY ROOMS

The nation's emergency rooms have been stretched thin for at least a decade or more, but a new analysis suggests that they have reached a breaking point. Their plight underscores how dreadfully unprepared we are to cope with a major disaster like pandemic influenza or mass casualties from a terrorism attack.

The crisis in emergency medical care was laid bare in three reports issued last week by the Institute of Medicine, a unit of the National Academy of Sciences. Half a million times a year ambulances are diverted from emergency rooms that are full and sent to others farther away. Emergency room patients who need admission to the hospital often spend eight hours or more—sometimes even two days or more—on gurneys in the hallways, waiting for a hospital bed to open up.

Some emergency rooms lack the services of key specialists, such as neurosurgeons, who shy away from emergency room duty because many uninsured patients can't pay and their malpractice premiums would skyrocket because of the risky nature of emergency cases. What is not known is how many people die as a result of delays in treatment or inadequate care under chaotic conditions. No measurement system tracks such data.

The emergency room crisis has many causes, none of them easily or cheaply resolved. The number of people seeking treatment in emergency rooms has jumped sharply over the past decade or so, from 90 million in 1993 to 114 million in 2003. Over the same period, cost pressures forced the closing of some 700 hospitals, almost 200,000 hospital beds and 425 emergency departments. The result is severe crowding, exacerbated by a huge influx of poor people seeking routine care who are either uninsured or on Medicaid but unable to find doctors willing to treat them. By law, emergency rooms must accept

all patients, whether they have insurance or not.

The institute's experts have many proposals for easing the situation, ranging from new regional systems to improve the flow of patients to the most appropriate and least crowded emergency rooms to an infusion of money to cover unpaid emergency care and to bolster preparedness for large-scale disasters. The most important change would be to stop diverting seriously ill ambulance patients and divert instead the poor patients who clog emergency rooms seeking routine care. That would require extending health coverage to the uninsured and providing more primary care clinics and doctors in poor neighborhoods.

RECOGNIZING LARRY W. WEIGLER

HON. SAM GRAVES

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 21, 2006

Mr. GRAVES. Mr. Speaker, I proudly pause to recognize Colonel Larry W. Weigler, Vice Wing Commander of the Missouri Air National Guard in St. Joseph, MO. Colonel Weigler will retire from the 139th Airlift Wing, St. Joseph, MO effective May 3, 2006 after more than 36 years of dedicated service in the Air National Guard.

The Colonel has been a member of the armed services since 1969 when he enlisted in the Missouri Air National Guard as an aircraft mechanic. In 1972 he received an Officer's commission to become an aircraft pilot. During his exemplary career Colonel Weigler participated in numerous overseas deployments including Operation Desert Storm and Operation Iraqi Freedom.

Mr. Speaker, I proudly ask you to join me in commending the career of Colonel Larry W. Weigler, who exemplifies stellar qualities of dedication and service to Northwest Missouri and the United States of America.

IN MEMORY OF JAMES LEE
RACKERS

HON. IKE SKELTON

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 21, 2006

Mr. SKELTON. Mr. Speaker, it is with deep sadness that I inform the House of the death of Mr. James Lee Rackers of Jefferson City, MO.

Mr. Rackers was born in Jefferson City, on December 27, 1933, son of Lee and Helen Heisen Rackers. He attended Central Missouri State University and graduated from Lincoln University in 1956, with a Bachelor of Science degree in Secondary School Education. He earned his masters in Secondary School Administration from the University of Missouri-Columbia. He was united in marriage to Nancy Brettschneider on November 24, 1955. They were blessed with four wonderful children, three sons and one daughter.

Mr. Rackers began his career teaching at Helias High School in the fall of 1956. He was the head basketball and track coach and assistant football coach. He was the Athletic Director from 1966 until 1967, when he became Assistant Principal. In 1971 Jim became the